STORY COUNTY APPLICATION FOR PERMIT TO USE OR EXPLODE DISPLAY FIREWORKS

APPLICANT INFORMATION	
Name:	
Address:	
Phone: Day: Evening:	
Operator's name and address (if different from applicant):	
DESCRIPTION OF OPERATOR'S COMPETENCY	
EVENT INFORMATION	
Date: Time: Location:	
Rain Date:	
INSURANCE INFORMATION	
Are you insured?	
☐ Yes	□ No
Name, address, and phone number of insurance company a	nd agent:
A certificate of insurance shall accompany the application.	
SIGNATURE OF APPLICANT	DATE
"Pursuant to Iowa Code §331.304(8) and §727.2, the Story County Board of Supe	ervisors may grant a permit for the use or explosion of dis

"Pursuant to Iowa Code §331.304(8) and §727.2, the Story County Board of Supervisors may grant a permit for the use or explosion of display fireworks upon a written application when the display fireworks will be handled by a competent operator. The operator shall handle and discharge the display fireworks according to applicable law and manufacturer's recommendations, and shall operate safely under all circumstances. The permittee/operator certifies that s/he has authority to operate display fireworks on and over the location listed in the permit where the display is to occur. Any such permit shall be void if the use occurs when a 'burn ban' is in effect or if conditions are conducive to fire. Any permit is valid only in the unincorporated areas of Story County, Iowa, and this permit is immediately void if any display fireworks are operated over any part of a city, airport, airstrip or outside of Story County (except non-nuisance airborne smoke that may drift from the display location). Any permit so issued does not immunize the applicant or operator from complying with all laws and regulations concerning the purchase, transportation, possession, storage, firing, and discharge of explosives and fireworks. The permittee/operator shall comply with lawful directives of any peace officer and emergency services worker and the permittee/operator shall produce the permit upon request of any peace officer or emergency services worker. The applicant/permittee and/or operator shall assume all liability and risk of loss, injury or death to any entity or person associated with the handling and/or discharge of the display fireworks, and agrees to indemnify and hold Story County, its agents and employees, harmless from any and all liability associated with the use or explosion of display fireworks. The permittee/operator specifically and voluntarily agrees to the foregoing and understands the granting or denial of this application is a matter of discretion resting solely with the Story County Board of Supervisors, its agents

- Attach certificate of insurance to the application
- Submit completed application and insurance information to the following:

Story County Auditor's Office 900 6th St. Nevada, Iowa 50201

The deadline for the Board of Supervisors' weekly meeting agenda is Thursday at 3 pm. Completed applications received by the deadline shall be placed on the agenda for the following Tuesday.

OFFICIAL USE ONLY	
☐ APPLICATION APPROVED	☐ APPLICATION DENIED
CHAIRPERSON, BOARD OF SUPERVISORS	DATE